

JUN 14 2006

PTO/SB/22 (12-04)

Approved for use through 7/31/2008 OMB 0551-0031

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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2006 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		Docket Number (Optional) 17221/007001	
Application Number 09/936,688-Conf. #9251		Filed September 17, 2001	
For VEHICLE PARKING LOT MANAGEMENT METHOD			
Art Unit 3629		Examiner D. W. Ruhl	

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

	<u>Fee</u>	<u>Small Entity Fee</u>	
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$120	\$60	\$
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$
<input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$ 1,020.00
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$

☐ Applicant claims small entity status. See 37 CFR 1.27.

☐ A check in the amount of the fee is enclosed.

☒ Payment by credit card. Form PTO-2038 is attached.

☐ The Director has already been authorized to charge fees in this application to a Deposit Account.

☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 50-0591.

I am the ☐ applicant/inventor.

☐ assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒ attorney or agent of record. Registration Number 33,986

☐ attorney or agent under 37 CFR 1.34.
Registration number if acting under 37 CFR 1.34 ALY

Jonathan P. Osha # 20031 DoSA
Signature Date June 14, 2006

Jonathan P. Osha
Typed or printed name Telephone Number (713) 228-8800

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 1 forms are submitted.

06/15/2006 MBINAS 00000017 09936688

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JUN 14 2006

PTO/SB/17 (01-06)
Approved for use through 7/31/2006. OMB No. 0302-0002
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Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

<p><i>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</i></p> <h2 style="margin: 0;">FEE TRANSMITTAL</h2> <h3 style="margin: 0;">For FY 2006</h3>		<p>Complete if Known</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">Application Number</td> <td>09/936,688-Conf. #8251</td> </tr> <tr> <td>Filing Date</td> <td>September 17, 2001</td> </tr> <tr> <td>First Named Inventor</td> <td>Thierry Brusseau</td> </tr> <tr> <td>Examiner Name</td> <td>D. W. Ruhl</td> </tr> <tr> <td>Art Unit</td> <td>3629</td> </tr> <tr> <td>Attorney Docket No.</td> <td>17221/007001</td> </tr> </table>		Application Number	09/936,688-Conf. #8251	Filing Date	September 17, 2001	First Named Inventor	Thierry Brusseau	Examiner Name	D. W. Ruhl	Art Unit	3629	Attorney Docket No.	17221/007001
Application Number	09/936,688-Conf. #8251														
Filing Date	September 17, 2001														
First Named Inventor	Thierry Brusseau														
Examiner Name	D. W. Ruhl														
Art Unit	3629														
Attorney Docket No.	17221/007001														
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27															
TOTAL AMOUNT OF PAYMENT	(\$)	1,020.00													

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>50-0591</u> Deposit Account Name: <u>Osha - Liang LLP</u>	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
	FILING FEES		SEARCH FEES		EXAMINATION FEES		
		<u>Small Entity</u>		<u>Small Entity</u>		<u>Small Entity</u>	
<u>Application Type</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fees Paid (\$)</u>
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
2. EXCESS CLAIM FEES							
<u>Fee Description</u>							<u>Small Entity</u>
							<u>Fee (\$)</u> <u>Fee (\$)</u>
Each claim over 20 (including Reissues)							50 25
Each independent claim over 3 (including Reissues)							200 100
Multiple dependent claims							360 180
<u>Total Claims</u>		<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>		
20		- 20 =	x	=	<u>Fee (\$)</u> <u>Fee Paid (\$)</u>		
HP = highest number of total claims paid for, if greater than 20.							
<u>Indep. Claims</u>		<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>			
3		- 3 =	x	=			
HP = highest number of independent claims paid for, if greater than 3.							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>			
	- 100 =	/50	(round up to a whole number) x	=			
							<u>Fees Paid (\$)</u>
4. OTHER FEE(S)							
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge): 1253 Extension for response within third month							1,020.00

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	33,986
Telephone	(713) 228-8600		
Name (Print/Type)	Jonathan P. Osha		
Date	June 14, 2006		